

WHAT IS CLAIMED IS:

1. A method for improving cardiac function, comprising:

inserting a compressive device into a patient in a region including the patient's heart; and

after the inserting of said compressive device into the patient, operating said compressive device to bring opposite walls of only one ventricle of the patient's heart into at least approximate contact with one another to thereby constrict and close off a lower portion of said one ventricle of the patient's heart.

2. The method defined in claim 1 wherein the operating of said compressive device includes applying said compressive device to close off only said lower portion of said one ventricle of the patient's heart.

3. The method defined in claim 2 wherein said one ventricle is the left ventricle of the patient's heart.

4. The method defined in claim 1 wherein the inserting of said compressive device includes inserting said compressive device through a trocar sleeve or cannula.

5. The method defined in claim 4 wherein said compressive device includes a tensile member, the inserting of said tensile member including introducing said tensile member through a catheter.

6. The method defined in claim 5 wherein the introducing of said tensile member includes passing a leading end portion of said catheter into a pericardial space about the patient's heart, the operating of said compressive device including ejecting said tensile member from said leading end portion of said catheter through a myocardial wall, a left ventricle of the patient's heart and a septum of the patient's heart, the operating of said compressive device further including exerting a tension force on said tensile member to draw the septum and the myocardial wall of said left ventricle together.

7. The method defined in claim 1 wherein said compressive device includes a tensile member, the inserting of said tensile member including introducing said tensile member through a catheter.

8. The method defined in claim 7 wherein the introducing of said tensile member includes passing a leading end portion of said catheter into a right ventricle of the patient's heart, the operating of said compressive device including ejecting said tensile member from said leading end portion of said catheter through a septum and a left ventricle and a myocardial wall of the patient's heart, the operating of said compressive device further including exerting a tension force on said tensile member to draw said septum and said myocardial wall together.

9. The method defined in claim 7 wherein said tensile member includes a first segment and a second segment, the introducing of said tensile member includes

passing a leading end portion of said catheter into a left ventricle of the patient's heart, the operating of said compressive device including ejecting said first segment from said leading end portion of said catheter through a septum of the patient's heart and additionally including ejecting said second segment through an outer wall of said left ventricle, the operating of said compressive device further including twisting said first segment and said second segment about one another to draw opposing walls of said left ventricle together.

10. A method for improving cardiac function, comprising:

inserting a tensile member into a patient; and

deploying said tensile member in the patient's heart so as to effectively constrict and substantially close off a lower or apical portion only of only a left ventricle of the patient's heart, thereby reducing the volume of the left ventricle and only the left ventricle of the patient's heart.

11. The method defined in claim 10 wherein the deploying of said tensile member includes anchoring one end of said tensile member to a septum of the patient's heart and an opposite end of said tensile member to a myocardial sidewall of said left ventricle.

12. The method defined in claim 11 wherein the anchoring of said tensile member includes placing a flanged element of said tensile member in contact with heart

tissues.

13. The method defined in claim 11 wherein the anchoring of said tensile member includes placing a barbed element of said tensile member in contact with heart tissues.

14. The method defined in claim 10 wherein said tensile member is a tack, the deploying of said tensile member including ejecting said tack from a tubular member.

15. The method defined in claim 10 wherein the deploying of said tensile member includes passing said tensile member through a trocar sleeve or cannula.

16. The method defined in claim 10 wherein the deploying of said tensile member includes:

inserting a leading end portion of a catheter into a vascular system of the patient and into a ventricle of the patient's heart;

ejecting said tensile member from said leading end portion of said catheter into heart tissue so that said tensile member is anchored to the patient's heart tissue; and

exerting tension on said tensile member to pull a septum and a myocardial sidewall of the left ventricle of the patient's heart towards one another so as to constrict and substantially close off only the lower or apical portion of only the patient's left ventricle.

17. The method defined in claim 10 wherein the deploying of said tensile member includes placing sufficient tension on said tensile member in the patient's heart so as to bring opposing inner surface of said left ventricle into substantial contact with one another to thereby effectively constrict and substantially close off the lower or apical portion of the left ventricle of the patient's heart.

18. A method for reducing ventricular volume, comprising:

inserting a leading end portion of a catheter through part of a patient's vascular system and into a ventricle of the patient's heart;

deploying a cardiac insert or implant from said leading end portion of said catheter; and

disposing said cardiac insert or implant in the patient's heart to reduce the volume of only a left ventricle of the patient's heart.

19. The method defined in claim 18 wherein said cardiac insert or implant is a tensile member, further comprising attaching said tensile member to the patient's heart, and exerting tension on said tensile member to draw a septum of the patient's heart and a myocardial sidewall of the patient's left ventricle towards one another at a lower end of the left ventricle.

20. The method defined in claim 19 wherein said tensile member is provided with at least one barb at a leading end, the attaching of said tensile member to the patient's

heart including embedding said barb in the patient's heart.

21. The method defined in claim 19 wherein said tensile member is one of two tensile members, further comprising attaching the other tensile member to the patient's heart, the exerting of tension on said one of said tensile members including twisting the tensile members about one another.

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